

## October 16-19, 2005 St. Louis, Missouri

## Conference Registration Form (mail in only)

On-line Registration - www.mdc.mo.gov/seafwa

(Lodging arrangements with Millenium Hotel must be made separately – information available on the above web site)

Attendee/Student Information	
Name	Agency
Name to be put on Name Badge	
Address	
City, State, Zip	
Work Phone	Fax Number
E-mail Address	
Early registrants will be entered into a drawing for a	Durango Model 0946LWRBR2960 Right handed bo
THERE WILL BE NO REFUND ON REGIST	TRATION FEES AFTER OCTOBER 12, 2005
Conference Registration	
Anyone Attending Technical Sessions Mus	t Register as Conference Attendee
Early Conference Registration – ON OR BEFORE Oc. \$ 185	tober 1, 2005
The following events are included as part of you Welcome Reception, Sunday Night, October Banquet, Tuesday Night, October 18, 2005	r registration. Please indicate events you will attend: 16, 2005
Conference Registration - AFTER October 1, 2005 \$225	
The following events are included as part of you Welcome Reception, Sunday Night, October Banquet, Tuesday Night, October 18, 2005	r registration. Please indicate events you will attend: 16, 2005
Spouse/Guest Event Fees  Please indicate which events guest/spouse will attend:  \$30.00 Welcome Reception, Sunday Nig  \$35.00 Banquet, Tuesday Night, Octobe Spouses Name	
Spouse/Guest Tours  Please indicate which tours guest/spouse will attend)  (must register for tours by September 16, 20)  \$24/person Sunday, October 16 – 1-4pn  \$23/person Monday, October 17 – 1-4pr  \$31/person Tuesday, October 18 – 10ar  Spouse/Guest Name	n – Anheuser-Busch Brewery & History South Side n – Discover St. Louis

For additional tour information, see web site www.mdc.mo.gov/seafwa

Federal Tax ID # - 43-1797156	(no expiration) State of MO Tax ID # - 16673808	3 (no expiration)
<b>Or FAX to:</b> 888/310-8900 (cred	lit cards only)	
Registration by Mail to: SEAFWA 2005 c/o TCM PO Box 7276 Bismarck, ND 58507-7276	Enclosed Check Or Money Order Payable to MCHF-SE  Credit Card Information: Card Type:VisaMastercardDiscover Card Number: Name as it appears on Card Amount to be charged to card \$	
Payment Information Attendee Registration(s) Spouse/Guest Fees Spouse/Guest Tour Fees Student Registration Commercial Exhibit Booth Not-for-Profit Exhibit Booth Total Remittance	\$ \$ \$ \$ \$ \$	
Exhibit Contact Information:	John Vogel 636/300-1953 Ext 318 or email: john.vogel@Joel Porath 636/300-1953 Ext. 226 or email: joel.porath@	mdc.mo.gov
	hibit Booth  stration Package is limited to Commercial Exhibitors Ol  Conference functions must register for those functions.	
\$500 Commercial Exh The following events are	nibit Booth (includes one conference registration) e included as part of your registration. Please indicate ever , Sunday Night, October 16, 2005 light, October 18, 2005	nts you will attend:
Phone:	Fax:	
Contact Name (Last, First, MI): Address:		
<u> </u>	ov/seafwa for additional information.  et X 10-feet with 1 table and 2 chairs	
member states, territories, fed Information: Chris Vitello 4	I - Monday, October 17, 2005. No Charge for Career Faideral agency sponsors and other conference sponsors 17-895-6881 Ext. 1060 or email <a href="mailto:chris.vitello@mdc.mo.govey">chris.vitello@mdc.mo.govey</a> 573/522-4115 Ext. 3688 or email	

**NOTE**: Registration for the SEAFWA conference is being coordinated through TCM

**Conference Registration/General Information contacts:** 

**Student Registration** 

**Denise Bateman** 573/522-4115 Ext. 3150 or denise.bateman@mdc.mo.gov **Donna Richards** 573/522-4115 Ext. 3823 or donna.richards@mdc.mo.gov **Denise Lehmann** 636/300-1953 Ext. 223 or denise.lehmann@mdc.mo.gov